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Mentor Agreement

NAME OF BUSINESS _____

CONTACT NAME _____

ADDRESS _____

PHONE _____ FAX _____

EMAIL _____

WEBSITE _____

TYPE OF BUSINESS _____

I agree to have the above information published on the Idaho Women's Commission website. Mentees will be able to look on the website to find a mentor. I agree to contact the Idaho Women's Commission to inform them when a mentee contacts me. This agreement is for one year unless otherwise specified.

Name of responsible party _____ Date _____